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Center News

Marian Butterfield, M.D., M.P.H., Begins Three-Year Career Development Award

Dr. Marian Butterfield, director of the Women's Mental Health Program, has begun a three-year, Research Career Development Award. The title of her research will be "Gender Differences in HIV, HBV, HCV Infections and Associated Risks in Veterans with Severe Mental Illness."

Since her years at Kalamazoo College as an undergraduate student, Dr. Butterfield has had a longstanding interest in research. She became interested in the interface between health and behavior during her graduate school in public health and medical school education at the University of North Carolina at Chapel Hill. Upon completing her residency in psychiatry at UNC in 1994, she joined the psychiatry faculty at Duke University and the Durham VA Medical Center. At the VA she was recruited to direct the mental health component, known as the Women's Mental Health Program, of the newly established Women Veteran's Comprehensive Health Center. She then became a research associate with Durham's Center for Health Services Research in Primary Care. Her charge on starting her faculty position was to set up a mental health program to meet the needs of women veterans seeking primary care, as well as to provide sexual trauma counseling services to women who had been victimized during their military service. Dr. Butterfield says it was this experience that confirmed her interest in clinical epidemiology.

"In my initial research, I established protocols to screen for trauma and mental disorder symptoms among women veterans. This research led to the use of a screening instrument to facilitate the identification and referral of women veterans who experienced military sexual trauma," says Dr. Butterfield. "As a result, my clinical research has contributed to a more complete understanding of the psychiatric, behavioral, and health affects of trauma and victimization of women."

Dr. Butterfield, in collaboration with other researchers on a National Institute of Mental Health study, "Seroprevalence of HIV and Associated Infections in SMI (Severely Mentally III) Persons," found that persons with SMI showed significantly higher rates of HIV, hepatitis B (HBV), and hepatitis C (HCV) than the rates in the general population. For the past two years, she has been the principal investigator on a VA-funded Epidemiological Research and Information Center project HIV Seroprevalence and Risks in Veterans with Severe Mental Illness. For her three-year Career Development Award study, Dr. Butterfield plans to assess the infections and risks of SMI veterans and gender-based prevalence rates and risks for these infections. "My goal," said Dr. Butterfield, "is to become independently funded to develop targeted risk interventions and 'best practices' treatment plans for SMI veterans who are at risk or are infected with these pathogens. Overall, I hope my work will contribute to 'bridging' the sciences of epidemiology and psychiatry to the clinical practice of health services delivery to SMI veterans."

Drs. Calhoun and Steinhauser Receive Institute for Medical Research Grants

Patrick Calhoun, Ph.D., and Karen Steinhauser, Ph.D., of Durham's Health Services Research Service, have each received a \$15,000 research grant from the Institute for Medical Research (IMR). The IMR is a non-profit, private research corporation established in

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1989 through the Department of Veterans Affairs to serve as flexible support for research at VA medical centers nationwide.

Dr. Calhoun, an associate researcher and a staff psychologist with the Raleigh Mental Health Community-Based Outpatient Clinic, a VA health clinic in Raleigh, N.C., received his grant for his study, "Effectiveness of Group Cognitive Behavioral Therapy for Aggression and Anger in Veterans with Post-Traumatic Stress Disorder." Post-Traumatic Stress Disorder (PTSD) is one of the most common mental disorders in the United States, with a particularly high rate among individuals exposed to war. Anger and associated behavioral problems are symptomatic of person suffering from PTSD and are an important concern of veterans seeking clinical services. Conservative estimates suggest that as many as 22 percent of Vietnam veterans (830,000) have chronic PTSD that requires clinical attention.

Veterans with combat-related PTSD are found to be considerably more angry and report greater hostility, anger-related job problems, and more acts of interpersonal violence than veterans without PTSD. There is also growing evidence that hostility and anger negatively impact physical health. Studies have demonstrated a link between anger, hostility and cynicism and serious health problems, including cardiovascular disease. Veterans with PTSD who can learn to better manage their anger can not only improve their personal, social, and work-related lives but may reduce anger-related health risks.

"Anger management has been recognized as a key component of PTSD treatment," said Dr. Calhoun, "yet there has been relatively little research examining the effectiveness of psychotherapeutic interventions for treatment of anger and aggression with a veteran population. Currently, there are no well-controlled studies that examine the effectiveness of the group intervention for treatment of severe anger among patients with combatrelated PTSD. The primary aim of this proposal will be to demonstrate the effectiveness of group cognitive-behavioral treatment for anger and aggression. It is our long term desire that a valid group intervention would provide greater availability of services to our veteran population."

Dr. Steinhauser, a medical sociologist and associate director for the Program on the Medical Encounter and Palliative Care at the Durham VAMC, has been approved for an IMR grant for her study "Developing a Longitudinal Database of Hospice Care in North Carolina."

Dying patients confront complex and unique challenges that threaten their physical, emotional, and spiritual integrity. The SUPPORT study (Study to Understand Prognosis and Preferences for Outcomes and Risks of Treatments) documented that many patients die

prolonged and painful deaths, receiving unwanted, expensive, and invasive care. Yet, increasingly, patients and families have choices about the care they receive at the end of life and, for many, hospice has provided a welcome alternative.

In 1993 the Department of Veterans Affairs (DVA) instructed all VA medical centers to establish hospice programs to improve care for dying patients and their families. In response, many VA medical centers contracted with community hospice organizations to provide palliative care for veterans at the end of life. Therefore, to study the hospice care provided to our veterans, one must study the community hospices, says Dr. Steinhauser. Despite the tremendous role hospice plays in providing palliative care to dying patients, and the existence of a specific Medicare benefit written to fund this care, relatively little empirical evidence exists regarding the nature, access to, and quality of these services. "Here in North Carolina, we are in a unique position to evaluate hospice care across the state," says Dr. Steinhauser. "The Carolinas Center for Hospice and End of Life Care is the only organization to have complete data on a population of hospices, from the founding of the first North Carolina hospice in 1979 to the present." The purpose of this project is to convert these administrative data into a longitudinal research database that would house crucial information about the delivery of care.

The creation of a North Carolina hospice research database will allow researchers to answer a number of important questions. Who is receiving care? To what extent are hospices providing care for Alzheimer's patients versus those with cancer? Do services differ by geographic region? What are the costs associated with different types of hospice care? Evidence-based answers to these and other questions would provide clinicians and administrators with a better understanding of the system into which they refer patients, and foster design of care systems to meet most effectively the needs of terminally ill veterans and their families. This research database will also be designed to accommodate additional data from the year 2000 forward.

HSR&D News

Health Service Research Moves to New Location

Health Services Research has moved its main office to a new location within the Durham VA Medical Center campus. Due to the Enhanced Use construction that begins this summer, HSR&D's use of Building 3 and a trailer will no longer be possible after June 1. As a result, new office space is needed. An available building has been refurbished that provides most of the needed

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replacement space for the department. HSR&D's telephone numbers and fax number will remain the same. Our new mailing address is:

> Health Services Research & Development VA Medical Center (152) Bldg. 6 508 Fulton Street Durham, N.C. 27705

HSR&D Welcomes New Staff

Health Services Research would like to welcome Norma Knutson and Sarah Baird as new staff members to Health Services Research and Development.

Norma Knutson, Ph.D., M.S.N., is the project manager for Dr. Tulsky's study "Can Interactive Voice Response Improve Patient-Centered Outcomes?"

Dr. Knutson received her undergraduate degree in nursing in 1977 from East Carolina University and received her master's degree in nursing in 1983 from the University of North Carolina at Greensboro. She graduated in 1991 with a Ph.D. from the Department of Epidemiology, School of Public Health at the University of North Carolina at Chapel Hill. After graduation, she completed a



Norma Knutson, PhD

post-doctoral fellowship in infectious disease epidemiology at UNC.

Dr. Knutson has been a senior epidemiologist with the Immunization Section of the North Carolina Department of Environment, Health and Natural Resources, and most recently a faculty research associate with the Division of Occupational and Environmental Medicine, Department of Community and Family Medicine at the Duke University Medical Center. She has also been an instructor in the School of Nursing at East Carolina University and is licensed by the North Carolina Board of Nursing.

Sarah Baird is a new research assistant for Dr. James Tulsky's Robert Wood Johnson Managed Care study, which will research how doctors negotiate patient expec- tations in managed care systems.

Ms. Baird has a broad background in communication and management. A 1982 graduate of the College of William and Mary, with a B.A. in



Sarah Baird

government, she most recently worked at the Rajamongala Institute of Technology in Bangkok, Thailand, as a teacher of English. She has worked as a senior management analyst for the Virginia Department of Motor Vehicles, was the agency coordinator for the Central Virginia Foodbank, and a management analyst for the United States Federal Court for the Northern District of Texas. Ms. Baird also has been actively involved in numerous volunteer capacities with the Refugee and Immigration Services, WorldTeach, Amnesty International, and Daily Planet, an evening shelter for homeless people. She is currently volunteering for the Durham chapter of Habitat for Humanity and the Duke Language Partners, a program to assist in English conversation and cultural exchange with visiting international residents affiliated with Duke University.

ERIC News

2001 VA Epidemiology **Summer Session Hosted** by the Durham ERIC

The VA Epidemiologic Research and Information Centers (ERICs) announce June 4 through June 8, 2001, as the dates for the third annual Summer Session in Epidemiology. The 2001 session is being hosted by the Durham ERIC and will be held on the University of North Carolina at Chapel Hill campus. The 2001 Summer Session is open to VA administrators, clinicians and researchers.

Accepted applicants will need to secure time away from work and resources for travel (air and ground transportation), evening meals and a \$250 registration fee. The registration fee includes course tuition, course book, lodging in University of North Carolina dormitories, five continental breakfasts and midday meals, Monday evening reception, and a Wednesday evening dinner. Continuing Medical Education credit will be available. Enrollment is on a first-come, first-served basis and space for the program is limited. All participants must register by May 1, 2001.

Registration will be coordinated through the University of North Carolina's Office of Continuing Education. Register by phone by calling 919-966-4032, or register through UNC's Web site at http://www.sph.unc.edu/oce

For further information regarding course topics and registration procedures, go to the Durham ERIC's Web site at: http://hsrd.durham.med.va.gov/eric/ or call Beth Armstrong at 919-286-6936 or e-mail at betharmstrong@mindspring.com.

HSR&D VA Medical Center (152) 508 Fulton Street Durham, NC 27705





Updated ICER Web Site Available

The updated ICER Web site is now available at http:// hsrd.durham.med.va.gov/. The Web address takes the viewer to the ICER Homepage which has five location options that make up the ICER: Health Services Research & Development; the Epidemiologic Research & Information Center; the Program on the Medical Encounter & Palliative Care; the Women's Health Research Program; and the ICER Biostatistics Unit. The homepage also offers links to current and past issue of the ICER newsletter, a calendar of events, employment opportunities, and information on contacting us. Our resident Web masters are Mike Monger and Steven Wade.

Recent Articles by Our Researchers

STEINHAUSER KE, Christakis NA, Clipp EC, McNeilly M, McIntyre L, TULSKY JA. "Factors considered important at the end of life by patients, family, physicians, and other care providers" JAMA 284(19): 2476-82, (November 15, 2000).

WHITED JD. "Teledermatology: Current Status and Future Directions" American Journal of Clinical <u>Dermatology</u> 2(2): 1-6, (2001).

Ard JD, Rosati R, ODDONE EZ. "Culturally-sensitive weight loss program produces significant reduction in weight, blood pressure, and cholesterol in eight weeks" Journal of the National Medical Association 92(11): 515-23, (November 2000).

BUTTERFIELD MI, Forneris CA, Feldman ME, Beckman JC. "Hostility and functional health status in women veterans with and without Post-Traumatic Stress Disorder: A preliminary study" Journal of Traumatic Stress 13(4): 735-41.

BOSWORTH HB, HORNER RD, Edwards LJ, MATCHAR DB. "Depression and other health determinants of values placed on current health state by stroke patients: Evidence fom the VA Acute Stroke (VASt) Study" Stroke 2000; 31: 2603-09.

ICER Update is published quarterly by the Health Services Research and Development Service, Department of Veterans Affairs Medical Center, Durham. For questions or comments contact Ed Cockrell, Administrative Officer, VAMC (152), 508 Fulton Street, Durham NC, 27705. Telephone: (919) 286-6936, Fax: (919) 416-5836. E-mail: COCKR001@mc.duke.edu Web Page: http://hsrd.durham.med.va.gov/

The Institute's mission is to provide quality information on issues regarding the organization, financing, and delivery of veterans' health care, and to build the epidemiological capacity of the Veterans Health Administration through the generation, synthesis, and dissemination of epidemiological information. The Institute also has a mission to educate health professionals through a spectrum of training grants in the techniques of health services and epidemiological research.